•			CATIO	N FEE DETE ute for Form PT	RMINATIO	N RECORD	formation unle		ays a valid OMB		
CLAIMS AS FILED – PART I (Column 1) (Column 2) SMALL ENTITY								OR		R THAN ENTITY	
	FOR NUMBER FILED NUMB			ER EXTRA	RATE	FEE		RATE	FEE		
BASIC FEE (37 CFR 1.16(a))				_		s	OR	Prisc	14		
TÖTAL CLAIMS (37 CFR 1.16(c)) minus 20 =				7)	x \$ =		1	72	7		
IND	EPENDENT CLAIN	AS //		7		^ 3	 	OR	× \$ [0] =		
(37 CFR 1.16(b)) 4 minus 3 = 1				× \$=		OR	× \$ XY =	84			
MULTIPLE DEPENDENT CLAIM PRESENT (37 CFR 1.16(d))						+ s=		OR			
* If 1	* If the difference in column 1 is less than zero, enter "0" in column 2.							OR	то Ж ь	24.1	
CLAIMS AS AMENDED – PART II									R THAN		
<u> </u>	I	(Column 1)		(Column 2)	(Column 3)	SMALL	ENTITY	OR 1		ENTITY	
AMENDMENT A	102316	CLAIMS REMAINING AFTER AMENDMENT		HIGHEST NUMBER PREVIOUSLY PAID FOR	PRESENT EXTRA	RATE	ADDI- TIONAL FEE	•	RATE	ADDI- TIONAL FEE	
	Total (37 CFR 1.15(c))	.0	Minus	20	<i>■</i> Ø	x \$=		OR	x \$=		
I N	Independent (37 CFR 1.16(b))		Minus	··· 4	10	x \$=		OR	x \$ =		
₹	FIRST PRESENTA	ATION OF MULTIPL	E DEPEND	ENT CLAIM (37 CF	R 1.16(d))	+s =		OR	+ \$ =		
	<u>. </u>			-		TOTAL ADD'L FEE		OR	TOTAL ADD'L FEE		
		(Column 1)		(Column 2)	(Column 3)	•	<u>-</u>	-		•	
AMENDMENT B		CLAIMS REMAINING AFTER AMENDMENT		HIGHEST NUMBER PREVIOUSLY PAID FOR	PRESENT EXTRA	RATE	ADDI- TIONAL FEE		RATE	ADDI- TIONAL FEE	
	Total (37 CFR 1.16(c))	•	Minus	**	а	x \$`=		OR	x \$=	·	
	Independent (37 CFR 1.16(b))	•	Minus	***	=	× \$=		OR	× \$ =		
₹	FIRST PRESENTATION OF MULTIPLE DEPENDENT CLAIM (37 CFR 1.16(R 1.16(d))	+ s =		OR	+ \$ = '		
						TOTAL ADD'L FEE		OR	TOTAL ADD'L FEE		
(Column 1) (Column 2) (Column 3)											
AMENDMENT C		CLAIMS REMAINING AFTER AMENDMENT		HIGHEST NUMBER PREVIOUSLY PAID FOR	PRESENT EXTRA	RATE	ADDI- TIONAL FEE		RATE	ADDI- TIONAL FEE	
	Total (37 CFR 1.16(c))	•	Minus	**	=	× \$=		OR .	x \$=		
	Independent (37 CFR 1.16(b))	•	Minus	***	=	× \$=		OR	x \$=		
A	FIRST PRESENTATION OF MULTIPLE DEPENDENT CLAIM (37 CFR 1.16(d))					+s =		OR	+ \$ =		
								OR	TOTAL ADD L FEE		
	If the entry in column 1 is less than the entry in column 2, write "0" in column 3.										
** If the "Highest Number Previously Paid For" IN THIS SPACE is less than 20, enter "20". *** If the "Highest Number Previously Paid For" IN THIS SPACE is less than 3, enter "3". The "Highest Number Previously Paid For" (Total or Independent) is the highest number found in the appropriate box in column 1.											

The "Highest Number Previously Paid For" (Total or Independent) is the highest number found in the appropriate box in column 1.

This collection of information is required by 37 CFR 1.16. The information is required to obtain or retain a benefit by the public which is to file (and by the USPTO to process) an application. Confidentiality is governed by 35 U.S.C. 122 and 37 CFR 1.14. This collection is estimated to take 12 minutes to complete, including gathering, preparing, and submitting the completed application form to the USPTO. Time will vary depending upon the individual case. Any comments on the amount of time you require to complete this form and/or suggestions for reducing this burden, should be sent to the Chief Information Officer, U.S. Patent and Trademark Office, U.S. Department of Commerce, P.O. Box 1450, Alexandria, VA 22313-1450. DO NOT SEND FEES OR COMPLETED FORMS TO THIS ADDRESS. SEND TO: Commissioner for Patents, P.O. Box 1450, Alexandria, VA 22313-1450.

If you need assistance in completing the form, call 1-800-PTO-9199 and select option 2.